Newgard

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees UAMPAIGN DISCLOSURE BY File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 electronically. Fax: 515-281-4073

IA ETHICS AND

2010 FEB 10 PM 2: 03

for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

Effective Mey 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically. Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization) FORM DR-2 DISCLOSURE KIEST IMPORTANT: Indicate by # type of committee you are reporting for: 5
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party (Rev. 12/2009) REPORT (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC For Office Use Only Comm. # 11) Local Ballot Issue Logged In CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Scanned Candidate Name SMY Computer Audited District (if Senate or House) Office Sought Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the charperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 7/2-330-3221 SIGNATURE OF PERSON FILING REPORT REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. TIANUNV 19 7210 I AM FILING A Indicate by # 2 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Detreck if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held DICKINSON STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL..... SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)............ Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ YES CONSULTANT BREAKDOWN (Schedule G Attached?) **CANDIDATE COMMITTEES ONLY:** VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
	CK THIS BOX IF ENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)						
Co	mini He	NAME AND ADDRESS TO WHOM	Neugo ha			
DATE EXPENDED (MM/DD/YR)	CANDIDATE 1D NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED		
	ID#	smy Newsard				
C1/ 2de/	CK#	MITTER	tensels Bill	\$408		
1 7	ID#					
	CK#	·				
	ID#					
	CK#					
	ID#					
	CK#					
	ID#					
	CK#					
	ID#					
	CK#					
	ID#					
	CK#					
	ID#					
	CK#					
	1		SUB-TOTAL	\$ 4.08		
			TOTAL (if last page of this schedule)			

THIS BOX APPLIES	TO CANDIDATES	" COMMITTEES	ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page

(for Schedule B)

Newgard

COMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization) (OMMITTEE NAME (Must be same as an Statement of Organization)					SCHEDULE E (Rev. 06/97) CONTRIBUTIONS CHECK THIS BOX IF AMENDING FORM	
DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION	
(MMVDD/YR)	of contributor, grey Newsorth 1902 13/4 9/7 mi (for i) In 9891	Market 4	cast	1721047		
422/2/0						
			SUB-TOTAL TOTAL (If last	172147		

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page (for Schedule E)

page of this schedule)